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represent. I know	mordistrict the candidate seeks to	re a resident of this state, would not be disc nat the signers are electors of the jurisdiction	sin, or a U.S. citizen, age 18 or older who, if I were a each of the signatures on this paper. I know the	I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, it I were a resident of this state, would not be discussified from voting under Wis. Stat. So.US. I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know
5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	(Circulator's residential address - Include number, street, and municipality.)	(Circulator's residential address		(Name of circulator)
WI 5430	St- Green Bay	FCIRCULATOR EMILIE	CERTIFICATION OF CIRCULATOR	Sill Calvin
12-5-21	Ovillage Green Scy.	103 SICCAY ST	11 Jack Medrel	10. The D. Willy
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12/5/21	Orlinge Green Bay	214 Emily St. or	Angela Allard 1.	1. Marka allard
Date of Signing Mo/Day/Year	Municipality of Residence Check the type and write the name of your municipality for voting purposes.	Residential Address (No P.O. Box Addresses) Street and Number or Rural Route (Rural address must also include box or fire no.)	Printed Name of Electors Resi	Signatures of Electors
ways be listed.	The name of the municipality of residence must always be listed.	1	en different than municipality of residence	The municipality used for mailing purposes, when different than municipality of residence, is not sufficient.
rs will have the the nomination	d above as a candidate so that voter sove seeks office. I have not signed	laced on the ballot at the election describe or district in which the candidate named al	me and residential address are listed above, be pled above. I am eligible to vote in the jurisdiction lection.	I, the undersigned, request that the candidate, whose name and residential address are listed above, be placed on the ballot at the election described above as a candidate so that voters will have the opportunity to vote for A him or her for the office listed above. I am eligible to vote in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination paper of any other candidate for the same office at this election.
	Bay WI	Green	Branch StQistrict Seat	Alderperson
1 00000	Name of jurisdiction or district in which candidate seeks office (required)			ired)
12022	Mo/Day/Year Madured Politic as primary water	5 4301 Special	State (required)	residential address or voting municipality)  1244 6 m 1) - 54 Cree Say
(name of mun/cipality)	M City	54. 5	1244 Emil	Bill Galvin
purposes ( <b>required</b> )	's municipality for voting	Candidate's residential address (required) No P.O. box addresses  Street, fire, or rural route number; box number (if rural route); and name of street or road	Candidate's residential address (required) No P.O. box addresses Street, fire, or rural route number; box number (if rural route); an	Candidate's name (required); no titles may be used.

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that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective-residences given. I intend to support this candidate. I am

Page No. 133

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I further certify I am either a qualified elector of Wisconsin, or a U.S. citizen, age 18 or older who, if I were a resident of this state, would not be disqualified from voting under Wis. Stat. §6.03. I personally circulated this nomination paper and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district the candidate seeks to represent. I know	I were a resident of this state, would not be disq low that the signers are electors of the jurisdiction	Visconsin, or a U.S. citizen, age 18 or older who, if btained each of the signatures on this paper. I kn	I further certify I am either a qualified elector of V circulated this nomination paper and personally o
(Circulator's residential address - Include number, street, and municipality.)	(Circulator's residential address		(Name of circulator)
Green Bey 15-54301	CERTIFICATION OF CIRCULATOR  Certify:   reside at 1244 Emilie St.	CERTIFICATION OF C	Bill Godi
Delive Green Bay 12/5/21	114 Cailie St &	Lawi Mak.	10. HMM
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Town Sycen Bay (2/5/2)	1125 Emilie St. G	Lori Deadman	6.
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listed above, be placed on the ballot at the election described above as a candidate so that voters will have the in the jurisdiction or district in which the candidate named above seeks office. I have not signed the nomination	be placed on the ballot at the election describec ction or district in which the candidate named ab	residential address are e. I am eligible to vote	I, the undersigned, request that the candidate, whose name and residential address are listed above, opportunity to vote for Sthim or ☐ her for the office listed above. I am eligible to vote in the jurisdic paper of any other candidate for the same office at this election.
nBay WI	Green	Seat 4	AlderDerson
Name of jurisdiction or district in which candidate seeks office/(required)/		_	
	4301		residential address or voting municipality)  1244 Sm. ); Sreen Scy
City (name of n	Mille St. "I	renoses (required if different than State (required)	Sill Galvin
Candidate's municipality for voting purposes (required)	Candidate's residential address ( <b>required)</b> <i>No P.O. box addresses</i> Street, fire, or rural route number; box number (if rural route); and name of street or road	Candidate's residential address ( <b>required</b> ) <i>No P.O. box ad</i> Street, fire, or rural route number; box number (if rural ro	Candidate's name (required); no titles may be used.
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	Say WI	Green		Seat		Alder person
	Name of jurisdiction or district in which candidate seeks office (required)	Name of jurisdiction or district	er (required if applicable)	Branch, district or seat number (required if applicable)	_	
2022	Mo/Day/Year  OH/OS/	bespring special	2430/	ent than state (required)	oreen Bank	Candidate's mailing address, including municipality for mailing purposes (required in different than residential address or voting municipality)    244   Smille St. Green South
unicipality)	City		1,c St.	1244		Bill Galvin
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